

ISSUE SLIP SAMPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	GH	8 49916	12/09 1/31/01
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓	.....	Rejected	N	.....	Non-elected
=	.....	Allowed	I	.....	Interference
-	(Through numeral)...	Canceled	A	Appeal
-	Restricted	O	Objected

Claim	Final	Original	Date
1	✓	✓	02/05/09
2	✓	✓	✓
3	✓	✓	✓
4	✓	✓	✓
5	✓	✓	✓
6	✓	✓	✓
7	✓	✓	✓
8	✓	✓	✓
9	✓	✓	✓
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Claim		Date					
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If more than 150 claims or 10 actions
staple additional sheet here

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